

NEIGHBORHOOD SERVICES

One Grand Street • Coldwater, MI 49036

INSPECTION APPEALS FORM

PROPERTY OWNER: If you believe the violation(s) identified in your inspection are not an accurate violation of code or believe the violation(s) cited are improper in any way, **YOU HAVE THE RIGHT TO APPEAL** the inspector's decision. An appeal **MUST** be submitted to the Public Safety Director within **20 days** of the inspection.

TO: **Director of Public Safety**

FROM: Name _____

Address: _____ City/State/Zip: _____

Telephone Number: _____

DATE: Date of Appeal Request: _____

As provided for by City Ordinance, I am requesting an appeal hearing with the City of Coldwater Property Maintenance Board of Appeals.

I am requesting an appeal of the decision by the Building Inspector / Rental Housing Inspector regarding the following locations / violation(s):

Location of Property _____

Date Notified of Inspectors Decision _____

Describe condition/situation being appealed _____

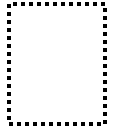
continue on back if needed...

Signature: _____

Date: _____

This appeal request will be forwarded to the Property Maintenance Board of Appeals. The City will notify you of the date and time of the appeals hearing.

staple or tape



Neighborhood Services Department
One Grand Street
Coldwater, MI 49036

Attn: Director of Public Safety

(fold)
